Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself					
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name					
Write the name that is on your government-issued picture identification (for example, your driver's		Bret First name C	First name	_		
	license or passport).	Middle name	Middle name			
	Bring your picture identification to your meeting with the trustee.	Votano Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years					
	Include your married or maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1380				

Del	otor 1 Bret C Votano		Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EIN	EIN			
5.	Where you live		If Debtor 2 lives at a different address:			
		18 Arthur Drive East Rockaway, NY 11518				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Nassau				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Dec	Bret C Votano					Case number (if known)					
Par	Tell the Court About	Your Bank	ruptcy C	ase							
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.									
	choosing to file under	■ Chap									
		☐ Chap	ter 11								
		☐ Chap	ter 12								
		☐ Chap	ter 13								
8.	How you will pay the fee	abo	out how your	Il pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details ut how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money er. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with e-printed address.							
						ion, sign and attach the Application fo	or Individuals to Pay				
			ne Filing Fee in Installments (Official Form 103A). equest that my fee be waived (You may request this option only if you are filing for Chapter 7. By law								
		but	t is not red plies to yo	quired to, waive you our family size and	ur fee, and may do so only if y you are unable to pay the fee	our income is less than 150% of the coin installments). If you choose this opicial Form 103B) and file it with your process.	official poverty line that tion, you must fill out				
9.	Have you filed for	■ No.									
	bankruptcy within the last 8 years?	☐ Yes.									
	•		District		When	Case number					
			District		When	Case number					
			District		When	Case number					
10.	Are any bankruptcy	■ No									
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.									
			Debtor			Relationship to you					
			District		When	Case number, if known	t				
			Debtor			Relationship to you					
			District		When	Case number, if known	l				
11.	Do you rent your residence?	■ No.	Go to	line 12.							
	. Joinottoo .	☐ Yes.	Has y	our landlord obtain	ed an eviction judgment again	st you?					
				No. Go to line 12							
				Yes. Fill out <i>Initia</i> this bankruptcy p		Judgment Against You (Form 101A)	and file it as part of				

Deb	otor 1 Bret C Votano			Case number (if known)				
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sol	e Proprietor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
		☐ Yes.	Yes. Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of busine	ess, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street	t, City, State & ZIP Code				
	it to this petition.		Check the app	ropriate box to describe your business:				
			☐ Health	Care Business (as defined in 11 U.S.C. § 101(27A))				
			☐ Single A	Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
			☐ Stockbr	roker (as defined in 11 U.S.C. § 101(53A))				
			☐ Commo	odity Broker (as defined in 11 U.S.C. § 101(6))				
			☐ None of	f the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed you are c cash-flow	If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).					
	For a definition of small	■ No.	■ No. I am not filing under Chapter 11.					
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition i Code.					
		☐ Yes.		er Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and e to proceed under Subchapter V of Chapter 11.				
		☐ Yes.		er Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I eed under Subchapter V of Chapter 11.				
Par	Donort if You Own or	Have Ans	. Uorordouo Dron	erty or Any Property That Needs Immediate Attention				
			nazaruous Frope	sty of Any Property That Needs infinediate Attention				
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No. □ Yes.	What is the hazar	d?				
	public health or safety?							
	Or do you own any property that needs immediate attention?		If immediate atten	······································				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the prop	perty?				
				Number, Street, City, State & Zip Code				

Debtor 1 Bret C Votano

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Bret C Votano		Case number (if known)							
Par	t 6: Answer These Quest	ions for R	eporting Purposes							
16.	What kind of debts do you have?	16a.	ned in 11 U.S.C. § 101(8) as "incurred by an							
			☐ No. Go to line 16b.							
			Yes. Go to line 17.							
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you owe	e that are not consumer debts or busines	s debts					
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.						
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	are paid that funds will be avail	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?						
	are paid that funds will		No							
	be available for distribution to unsecured creditors?		☐ Yes							
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000					
	you estimate that you owe?	□ 50-99)	5001-10,000	5 0,001-100,000					
		□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000					
19.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion					
	estimate your assets to be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion					
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion					
20.	How much do you	□ \$0 - \$	550,000	■ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion					
	estimate your liabilities to be?		001 - \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion					
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion					
Par	t7: Sign Below									
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.								
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.								
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me document, I have obtained and read the notice required by 11 U.S.C. § 342(b).										
		I request	relief in accordance with the cha	apter of title 11, United States Code, spec	cified in this petition.					
		bankrupt and 357	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Bret C Votano							
		Bret C		Signature of Debto	r 2					
		Executed	February 25, 2022 MM / DD / YYYY	Executed on MM	/ DD / YYYY					

Debtor 1 Bret C Votano		Case	e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Ur	nited States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	, ,	ies, certify that I have no know	ledge after an inquiry that the information in the
. •	/s/ Robert M. Fox, Esq.	Date	February 25, 2022
	Signature of Attorney for Debtor		MM / DD / YYYY
	Robert M. Fox, Esq.		
	Printed name		
	Law Offices of Robert M. Fox		
	Firm name		
	630 Third Avenue, 18th Fl		
	New York, NY 10017		
	Number, Street, City, State & ZIP Code		
	Contact phone (212) 867-9595	Email address	robert@rfoxlaw.com
	Bar number & State		

Fill	in this information	on to identify your o	case:				
Deb		Bret C Votano	Middle Name	Last Name			
Deb	otor 2	iist Name	Middle Name	Last Name			
(Spo	use if, filing)	irst Name	Middle Name	Last Name			
Uni	ted States Bankru	ptcy Court for the:	EASTERN DISTRICT C	F NEW YORK			
Cas	se number						
	own)					_	ck if this is an nded filing
Of	ficial Form	106Sum					
			nd Liabilities ar	nd Certain Statistical	Information		12/15
info	rmation. Fill out a	all of your schedule	s first; then complete th	e are filing together, both are educed information on this form. If you the box at the top of this pag	you are filing amend		
Par	t 1: Summarize	e Your Assets					
							assets of what you own
1.	Schedule A/B:	Property (Official Fo	rm 106A/B)			•	495 000 00
	1a. Copy line 55	, Total real estate, fr	om Schedule A/B			\$	485,000.00
	1b. Copy line 62	, Total personal prop	perty, from Schedule A/B.			\$	8,050.00
	1c. Copy line 63	, Total of all property	on Schedule A/B			\$	493,050.00
Par	t 2: Summarize	e Your Liabilities					
						Your	liabilities
							nt you owe
2.			aims Secured by Property on A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Pa	art 1 of Schedule D	\$	830,574.00
3.	.,	•	Jnsecured Claims (Officia				
Э.				ns) from line 6e of Schedule E/F.		\$	0.00
	3b. Copy the to	tal claims from Part 2	2 (nonpriority unsecured o	laims) from line 6j of Schedule E	E/F	\$	198,449.00
					Your total liabilities	\$	1,029,023.00
Par	t 3: Summarize	e Your Income and	Expenses				
4.		r Income (Official Foliation		÷ I		\$	8,660.67
5.		ur Expenses (Official hly expenses from lir				\$	8,875.00
Par	t 4: Answer Th	nese Questions for	Administrative and Stat	istical Records			
				Stical Records			
6.			er Chapters 7, 11, or 13? on this part of the form. C	heck this box and submit this for	m to the court with yo	ur other so	chedules.
7.	■ Yes What kind of de	ebt do you have?					
				debts are those "incurred by an ing for statistical purposes. 28 U.S		a persona	al, family, or
		· s are not primarily o ith your other schedu		ve nothing to report on this part o	of the form. Check this	s box and	submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 Bret C Votano Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

11,204.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill i	n this inform	nation to	identify	your case and t	his filine	ıa:					
Debt			C Votar			.g.					
Dobt		First Nan			le Name		Last Name				
Debt (Spous	or 2 se, if filing)	First Nan	ne	Midd	le Name		Last Name				
, ,	ed States Bar					אוכ.	T OF NEW YORK				
Office	eu States Dai	ikiupicy C	Jourt 101	the. LASTERN	DISTRI	·iC	TOF NEW TORK				
Case	e number _								I	Check if this is an	
	-									amended filing	
Ott:	icial Fa	woo 10	C / / []	•							
	icial Fo			-							
				operty			nly once. If an asset fits in more than one			12/15	
Part 1	nation. If more er every quest 1: Describe E	e space is ition. Each Residave any le	needed, a	attach a separate s	sheet to t	this	narried people are filing together, both are some. On the top of any additional pages state You Own or Have an Interest In nace, building, land, or similar property?				
1.1	18 Arthur I	Drive			What		s the property? Check all that apply Single-family home	Do not doduct	accurad alai	ma ar avamations. But	
_	Street address, if	f available, o	r other des	cription		Duplex or multi-unit building		Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.			
-	East Rock	away	NY	11518-0000		_]	Manufactured or mobile home Land	Current value entire propert	y?	Current value of the portion you own?	
	City		State	ZIP Code			Investment property Timeshare Other	Describe the I	\$970,000.00 \$485,000 ibe the nature of your ownership interest		
					Who	_ , ,			(such as fee simple, tenancy by the entireties, or a life estate), if known.		
							Debtor 1 only	Joint tenar	nt		
_	Nassau County					_	Debtor 2 only				
	County					_	Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if to		munity property	
					_		nformation you wish to add about this ite		uons)		
					prop	pert	ty identification number:				
							our entries from Part 1, including any			\$485,000.00	
p	ages you na	ave attaci	nea tor	Part 1. Write tha	t numbe	er i	here	=>		Ψ 100,000100	
Part 2	2: Describe	Your Vehic	les								
							y vehicles, whether they are registere hedule G: Executory Contracts and Un			hicles you own that	
3. Ca	ırs, vans, tru	ıcks, trac	tors, sp	ort utility vehicl	es, moto	orc	cycles				
	No										
	Yes										

Official Form 106A/B Schedule A/B: Property page 1

De	ebtor 1 Br	ret C Votano Case number (if	known)
		aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessorie bats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	s
ı	No		
_	□ Yes		
5		llar value of the portion you own for all of your entries from Part 2, including any entries for have attached for Part 2. Write that number here	=> \$0.00
Dء	rt 3: Describe	e Your Personal and Household Items	
		r have any legal or equitable interest in any of the following items?	Current value of the
			portion you own? Do not deduct secured claims or exemptions.
6.		goods and furnishings Major appliances, furniture, linens, china, kitchenware	
	Yes. Desc	scribe	
		misc furniture Location: 18 Arthur Drive, East Rockaway NY 11518	\$4,000.00
7.	In No □	elevisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; ncluding cell phones, cameras, media players, games	music collections; electronic devices
	Yes. Desc	scribe	
		tvs, computers. cell phones, ipad Location: 18 Arthur Drive, East Rockaway NY 11518	\$3,500.00
8.		antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamether collections, memorabilia, collectibles	p, coin, or baseball card collections;
9.	Examples: S	for sports and hobbies Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; on musical instruments	anoes and kayaks; carpentry tools;
	■ No		
	☐ Yes. Desc	scribe	
10.	Firearms Examples: I	Pistols, rifles, shotguns, ammunition, and related equipment	
	☐ Yes. Desc	scribe	
11.	Clothes Examples: I	Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No ■ Yes. Desc	oribo	
	Tes. Desi	SCHIDE	
		men's clothing Location: 18 Arthur Drive, East Rockaway NY 11518	\$500.00
12.	Jewelry Examples:	Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches,	aems. aold. silver
	■ No	- , , , , ,	y, y,
	☐ Yes. Desc	scribe	

Official Form 106A/B

De	otor 1	Bret C Votano)	Case number (if known)
13.	Non-fa	rm animals			
	Examp	oles: Dogs, cats, bi	rds, horses		
١	No				
[☐ Yes.	Describe			
	A 41		b b - b d M	Characteristics and the Control of t	
_	_	ner personal and	nousehold items you di	d not already list, including any health aids you did not list	
	No				
I	→ Yes.	Give specific infor	mation		
15.	Add t	he dollar value of	all of your entries from	Part 3, including any entries for pages you have attached	
					\$8,000.00
Dor	t 4: Des	scribe Your Financi	al Acceta		
				in any of the following?	Current value of the
Ъ	you ow	in or mave any leg	gai or equitable interest	in any or the ronowing:	portion you own?
					Do not deduct secured
					claims or exemptions.
16	Cash				
10.		oles: Money you ha	ave in your wallet, in your	home, in a safe deposit box, and on hand when you file your pet	ition
[⊐ No [′]	• •			
1	Yes				
				Cash	\$50.00
	□ No ■ Yes		you have maniple deceal	nts with the same institution, list each. Institution name:	
			17.1. checking	PNC	\$0.00
ı	Examp ■ No	bles: Bond funds, ir		orokerage firms, money market accounts	
ı	∟ Yes		Institution or issue	er name:	
19.	•	ıblicly traded stoe enture	ck and interests in incor	porated and unincorporated businesses, including an interest	est in an LLC, partnership, and
	No				
[☐ Yes.	Give specific infor	mation about them		
			Name of entity:	% of ownership:	
20.	Negoti	ment and corpor			
	INOIT-ITE	able instruments ir	nclude personal checks, c	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
	Non-ne ■ No	able instruments ir	nclude personal checks, c	ashiers' checks, promissory notes, and money orders.	
_	No	able instruments ir egotiable instrume	nclude personal checks, c	ashiers' checks, promissory notes, and money orders.	
_	No	able instruments ir egotiable instrume	nclude personal checks, control of the control of t	ashiers' checks, promissory notes, and money orders.	
21.	No Yes. Retiren	able instruments in egotiable instrument Give specific inform nent or pension a	nclude personal checks, conts are those you cannot the mation about them Issuer name:	ashiers' checks, promissory notes, and money orders.	g plans
21. I	■ No □ Yes. Retirent Examp	able instruments in egotiable instrument Give specific inform nent or pension a	nclude personal checks, conts are those you cannot the mation about them succounts A, ERISA, Keogh, 401(k),	ashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	g plans

Official Form 106A/B Schedule A/B: Property page 3

 No Yes. Give specific information about them 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them Money or property owed to you? Current value of portion you ow Do not deduct see	Debtor 1	Bret C Votano		Case number (if known)	
Yes	Your s Exam	share of all unused de	posits you have made so that you may co		nies, or others
No			Institution	n name or individual:	
24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. § \$530(b)(1), \$29A(b), and \$529(b)(1). No Yes	■ No		, ,	for life or for a number of years)	
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Yes			·		
25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your ber No	26 U.S.			orogram, or under a qualified state tuition pro	ogram.
 No Yes. Give specific information about them 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property	☐ Yes	Institut	ion name and description. Separately file	e the records of any interests.11 U.S.C. § 521(c)	:
26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them Money or property owed to you? Current value or portion you ow Do not deduct so claims or exemp 28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Securit benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	■ No			ning listed in line 1), and rights or powers exc	ercisable for your benefit
Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them 77. Licenses, franchises, and other general intangibles	⊔ Yes.	Give specific informa	ation about them		
27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them Money or property owed to you? Current value or portion you ow Do not deduct so claims or exemp 28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Securit benefits; unpaid loans you made to someone else No Yes. Give specific information 11. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	Exam				
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them Money or property owed to you? Current value of portion you ow Do not deduct so claims or exemp 28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Securit benefits; unpaid loans you made to someone else No Yes. Give specific information 11. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	☐ Yes.	Give specific informa	ation about them		
☐ Yes. Give specific information about them Money or property owed to you? Current value or portion you ow Do not deduct so claims or exemp 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Securit benefits; unpaid loans you made to someone else ☐ No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	_Exam _l			tion holdings, liquor licenses, professional licens	ses
portion you ow Do not deduct se claims or exemp 28. Tax refunds owed to you ■ No □ Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No □ Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Securit benefits; unpaid loans you made to someone else ■ No □ Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance		Give specific informa	ation about them		
 No Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support	Money or	property owed to yo	u?		Current value of the portion you own? Do not deduct secured claims or exemptions.
 Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Securit benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance 	_	funds owed to you			
Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Securit benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance		Give specific informa	tion about them, including whether you a	lready filed the returns and the tax years	
 Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Securit benefits; unpaid loans you made to someone else No Yes. Give specific information Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance 	Examp ■ No	ples: Past due or lump		pport, maintenance, divorce settlement, property	settlement
31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	Exam _i ■ No	ples: Unpaid wages, o benefits; unpaid	disability insurance payments, disability b loans you made to someone else	enefits, sick pay, vacation pay, workers' compe	nsation, Social Security
Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance					
	_Exam _l			nt (HSA); credit, homeowner's, or renter's insura	nce
■ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or revalue:	■ Yes.	Name the insurance			Surrender or refund value:
term life insurance Spouse - Meredith Votano			term life insurance		\$0.00

Official Form 106A/B Schedule A/B: Property page 4

Der	otor 1 Bret C Votano		Case number (if known)	
•	Any interest in property that is due you from some If you are the beneficiary of a living trust, expect procesomeone has died. No		are currently entitled to rec	eive property because
	☐ Yes. Give specific information			
•	Claims against third parties, whether or not you h Examples: Accidents, employment disputes, insurance No Yes. Describe each claim		and for payment	
_				
•	Other contingent and unliquidated claims of every No Yes. Describe each claim	, nature, including counterclaims	of the debtor and rights to	set off claims
_	Any financial assets you did not already list No			
	■ No Yes. Give specific information			
				1
36.	Add the dollar value of all of your entries from P for Part 4. Write that number here	, , , , , ,	5 ,	\$50.00
Part	t 5: Describe Any Business-Related Property You Own o	or Have an Interest In. List any real est	ate in Part 1.	
27 [Do you own or have any legal or equitable interest in any	husinoss-rolated property?		
	No. Go to Part 6.	business-related property:		
_	Yes. Go to line 38.			
_	Tes. Of to line 30.			
Part	16: Describe Any Farm- and Commercial Fishing-Relate If you own or have an interest in farmland, list it in Part		st in.	
46.	Do you own or have any legal or equitable interes	t in any farm- or commercial fishi	ng-related property?	
	■ No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	t 7: Describe All Property You Own or Have an Inte	rest in That You Did Not List Above		
53.	Do you have other property of any kind you did no	ot already list?		
	Examples: Season tickets, country club membership ■ No			
	☐ Yes. Give specific information			
54.	Add the dollar value of all of your entries from P	art 7. Write that number here		\$0.00
Part	t 8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			¢495 000 00
56.		\$0.00		\$485,000.00
57.		<u></u>		
58.		\$50.00		
59.		\$0.00		
60.				
61.		+ \$0.00		
62.			Copy personal property t	otal \$8,050.00
63.	Total of all property on Schedule A/B. Add line 55	5 + line 62		\$493,050.00

Official Form 106A/B Schedule A/B: Property

page 5

Debtor 1	Bret C Votano	Case number (if known)
- 00.0.	Diot o votano	0.000

Schedule A/B: Property

Official Form 106A/B

page 6

Fill	in this inform	ation to identify your case:				
Del	otor 1	Bret C Votano	No. 19			
Deb	otor 2	First Name	Middle Name	L	ast Name	
(Spo	use if, filing)	First Name	Middle Name	L	ast Name	
Uni	ted States Ban	kruptcy Court for the: EA	STERN DISTRICT OF N	EW Y	ORK	
	se number					☐ Check if this is an amended filing
∩f	ficial For	m 106C				
		C: The Prope	ertv You Cla	im	as Exempt	4/19
Be a	s complete and property you lis	d accurate as possible. If two sted on Schedule A/B: Proper attach to this page as many	o married people are filing	g toget	ther, both are equally responsible for source, list the property that you	r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
specany func exer	cific dollar am applicable sta Is—may be ur nption to a pa	ount as exempt. Alternativ atutory limit. Some exempti nlimited in dollar amount. H	ely, you may claim the foots—such as those for lowever, if you claim an	full fai r healt n exen	ir market value of the property be th aids, rights to receive certain b option of 100% of fair market valu	One way of doing so is to state a ing exempted up to the amount of enefits, and tax-exempt retirement e under a law that limits the t, your exemption would be limited
Par	t 1: Identify	the Property You Claim as	s Exempt			
1.	Which set of	exemptions are you claiming	ng? Check one only, eve	n if yo	ur spouse is filing with you.	
	You are cla	iming state and federal nonb	ankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are cla	iming federal exemptions. 1	1 U.S.C. § 522(b)(2)			
2.	For any prope	erty you list on Schedule A	/B that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own Copy the value from Check only one box for each exemption.		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption		
	10 Arthur Di	rivo East Bookaway NV	Schedule A/B			NVCDI D & 5206
	11518 Nass	rive East Rockaway, NY sau County	\$485,000.00		\$64,500.00	NYCPLR § 5206
	Line from Scho	edule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	misc furnitu	ire 3 Arthur Drive, East	\$4,000.00		\$4,000.00	NYCPLR § 5205(a)(5)
	Rockaway N Line from School	NY 11518			100% of fair market value, up to any applicable statutory limit	
		ers. cell phones, ipad	\$3,500.00		\$3,500.00	NYCPLR § 5205(a)(5)
	Location: 18 Rockaway N Line from Scho				100% of fair market value, up to any applicable statutory limit	
	men's clothi	ing 3 Arthur Drive, East	\$500.00		\$500.00	NYCPLR § 5205(a)(5)
	Rockaway N				100% of fair market value, up to any applicable statutory limit	
3.		ning a homestead exemption			led on or after the date of adjustme	nt.)
	Yes. Did		ered by the exemption w	ithin 1	,215 days before you filed this case	?
Offic	☐ Yeadial Form 106C		chedule C: The Propert	y You	Claim as Exempt	page 1 of 2

Debtor 1	Bret C Votano	Case number (if known)

Fill in this inform	nation to identify yo	our case:			
Debtor 1	Bret C Votano				
Debior 1	First Name	Middle Name Last Name			
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Ba	nkruptcy Court for th	e: EASTERN DISTRICT OF NEW YORK			
Coco number					
Case number _ (if known)				☐ Check	if this is an
				_	led filing
	D: Creditor	s Who Have Claims Secure	<u> </u>	<u> </u>	12/15
	e Additional Page, fill i	t out, number the entries, and attach it to this form.			
1. Do any creditors	have claims secured	by your property?			
□ No. Check	k this box and submit	this form to the court with your other schedules.	ou have nothing else	to report on this form.	
Yes. Fill in	all of the information	n below.			
Part 1: List A	II Secured Claims				
2. List all secured	claims. If a creditor has	more than one secured claim, list the creditor separate	Column A	Column B	Column C
		as a particular claim, list the other creditors in Part 2. As tical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 SIs/equity	/	Describe the property that secures the claim:	\$462,000.00	\$970,000.00	\$0.00
Creditor's Nam		Real Estate Mortgage			
Attn: Ban					
8742 Luce Highlands	ent Blvd. s Ranch, CO	As of the date you file, the claim is: Check all that apply.			
80129		Contingent			
Number, Street	t, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or se	ecured		
Debtor 2 only		car loan)			
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of t	he debtors and another	☐ Judgment lien from a lawsuit			
Check if this community de		Other (including a right to offset)			
Date debt was inc	Opened 07/12 Last Active	Last 4 digits of account number 0424			

Date debt was incurred 8/10/18

Last 4 digits of account number

Debtor 1 Bret C Vo	tano		Case number (if known)				
First Name	Middle N	ame Last Name					
2.2 TIAA Bank Creditor's Name		Describe the property that secures the claim:	\$149,000.00	\$970,000.00	\$0.00		
501 Riverside		As of the date you file, the claim is: Check all that apply.					
Jacksonville,		☐ Contingent					
Number, Street, City,	State & Zip Code	☐ Unliquidated ☐ Disputed					
Who owes the debt?	Check one.	Nature of lien. Check all that apply.					
Debtor 1 only		■ An agreement you made (such as mortgage or s	ecured				
Debtor 2 only		car loan)					
Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechanic's lien)					
At least one of the de	btors and another	☐ Judgment lien from a lawsuit					
Check if this claim recommunity debt	elates to a	Other (including a right to offset)					
Date debt was incurred		Last 4 digits of account number					
US Small Bus	iness						
2.3 Administratio	n	Describe the property that secures the claim:	\$219,574.00	Unknown	Unknown		
Creditor's Name		Government Miscellaneous Debt					
A44 - D I							
Attn: Bankrup 409 3rd St, Sv	otcy	As of the date you file, the claim is: Check all that					
Washington, I		apply.					
Number, Street, City,		Contingent					
Number, Street, City,	State & Zip Code	☐ Unliquidated ☐ Disputed					
Who owes the debt?	Check one.	Nature of lien. Check all that apply.					
■ Debtor 1 only		■ An agreement you made (such as mortgage or s	ecured				
Debtor 2 only		car loan)					
☐ Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechanic's lien)					
At least one of the del	btors and another	☐ Judgment lien from a lawsuit					
Check if this claim recommunity debt	elates to a	Other (including a right to offset)					
	Opened 4/01/13 Last Active						
Date debt was incurred	11/20/14	Last 4 digits of account number 1150					
Add the dollar value of	of your entries in C	olumn A on this page. Write that number here:	\$830,574.	00			
		the dollar value totals from all pages.	\$830,574.	00			
Write that number her	re:		*****				
Part 2: List Others	to Be Notified fo	r a Debt That You Already Listed					
trying to collect from yo	ou for a debt you only of the debts that	e notified about your bankruptcy for a debt that yo we to someone else, list the creditor in Part 1, and t you listed in Part 1, list the additional creditors he iis page.	then list the collection agen	cy here. Similarly, if yo	u have more		
	Street, City, State &	k Zip Code On w	nich line in Part 1 did you ente	r the creditor? 2.1			
Juliana Thib Friedman Va	artolo LLP		digits of account number				
85 Broad St New York, N	•						

					_	
Fill in this in	formation to identify your	case:				
Debtor 1	Bret C Votano					
DODIO! !	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK			
Case numbe (if known)	r				по	heck if this is an
						mended filing
					=	-
	orm 106E/F					
<u>Schedule</u>	e E/F: Creditors W	/ho Have Unsecu	red Claims			12/15
Schedule D: Ci left. Attach the name and case	xecutory Contracts and Unexpreditors Who Have Claims Sec Continuation Page to this page number (if known). st All of Your PRIORITY Ur	ured by Property. If more spa ge. If you have no information	ce is needed, copy t	he Part you need, fill it out,	number the en	tries in the boxes on the
1. Do any cr	editors have priority unsecure	ed claims against you?				
■ No. Go	to Part 2.					
☐ Yes.						
Part 2: Lis	st All of Your NONPRIORIT	Y Unsecured Claims				
	editors have nonpriority unse					
	• •		st with wave ather ashe	adula a		
□ NO. 10	u have nothing to report in this p	art. Submit this form to the coul	t with your other sche	edules.		
Yes.						
unsecured	your nonpriority unsecured cl claim, list the creditor separatel creditor holds a particular claim, l	y for each claim. For each claim	listed, identify what t	ype of claim it is. Do not list c	laims already inc	luded in Part 1. If more
						Total claim
4.1 Ban	k of America	Last 4 digits of	of account number	1486		\$1,281,00
Nonp	riority Creditor's Name					
	: Bankruptcy	VA/In any company tile.		Opened 06/07 Last	Active	
	9 Savarese Circle pa, FL 33634	when was the	e debt incurred?	3/24/15		-
	per Street City State Zip Code	As of the date	you file, the claim i	s: Check all that apply		
Who	incurred the debt? Check one.					
■ De	ebtor 1 only	☐ Contingent				
□ De	ebtor 2 only	☐ Unliquidate	ed			
□ De	ebtor 1 and Debtor 2 only	☐ Disputed				
☐ At	least one of the debtors and an	other Type of NONE	RIORITY unsecured	d claim:		
	heck if this claim is for a com	,				
debt	claim subject to offset?	☐ Obligations report as priori		ration agreement or divorce t	hat you did not	
Is the		<u></u> '	•	g plans, and other similar deb	nts	
		·	•		,,,,	
□ Ye	es es	Other Spe	cify Credit Card			

Debtor 1 Bret C Votano		Case number (if known)			
4.2	Four Twelve Ventures LLC Nonpriority Creditor's Name	Last 4 digits of account number		\$60,534.00	
	c/o Paul Q. Goyette ESQ 2366 Gold MEadow Way Suit Rancho Cordova, CA 95670	When was the debt incurred?	9/4/2020		
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	Tother. Specify breach of content of the internation of the internatio	ontract PG Re:Dagga al		
4.3	Joseph & Mary Napoli Nonpriority Creditor's Name	Last 4 digits of account number		\$60,000.00	
	c/o Harry Raptakis, ESQ 88 Second Street Mineola, NY 11501	When was the debt incurred?	04/18		
	Number Street City State Zip Code	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Capital	pg promissory note re: Konig		
4.4	Mercedes-Benz Financial Services Nonpriority Creditor's Name	Last 4 digits of account number	6001	\$2,284.00	
	Attn: Bankruptcy Po Box 685 Roanoke, TX 76262	When was the debt incurred?	Opened 11/08/12 Last Active 01/22		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	■ Other. Specify Auto Lease	•		

Official Form 106 E/F

Debtor	1 Bret C Votano	Case number (if known)			
	Step Equities LLC c/o	Last 4 digits of account number		\$65,000.00	
	Nonpriority Creditor's Name Joseph J. Schwartz, PC 3118 Quentin Rd. Brooklyn, NY 11234	When was the debt incurred?			
-	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	■ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify breach of o	contract		
4.6	Transworld System Inc	Last 4 digits of account number	4308	\$1,311.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15630	When was the debt incurred?	Opened 05/21 Last Active 07/18		
-	Wilmington, DE 19850 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify Collection	Attorney National Grid		
4.7	U.S. Department of the Treasury (Fax Onl Nonpriority Creditor's Name	Last 4 digits of account number	7551	Unknown	
	Attn: Bankruptcy 1500 Pennsylvania Avenue, Nw Washington, DC 20220	When was the debt incurred?	Opened 4/12/16 Last Active 7/28/16		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	ag. 555 51 divolot that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify			

Official Form 106 E/F

Debtor	1 Bret C Votano		Case number (if known)	
4.8	Volkswagen Credit, Inc Nonpriority Creditor's Name	Last 4 digits of account number	3262	Unknown
	Attn: Bankruptcy Po Box 3 Hillsboro, OR 97123	When was the debt incurred?	Opened 11/21/12 Last Active 9/21/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separations	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ý	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Auto Lease	9	
4.9	Weltman Weingerg & Rei	Last 4 digits of account number	0961	\$4,321.00
	Nonpriority Creditor's Name 965 Keynote Circle Brooklyn Heights, OH 44131	When was the debt incurred?	Opened 10/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	_ 110		Attorney Accesslex Institute Dba	
	Yes	Other. Specify Access	Action by Accessica montate But	
4.1	Weltman Weingerg & Rei	Last 4 digits of account number	0920	\$3,718.00
	Nonpriority Creditor's Name 965 Keynote Circle Brooklyn Heights, OH 44131	When was the debt incurred?	Opened 10/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharii	on plans, and other similar debts	
	■ No			
	Yes	Other. Specify Access	Attorney Accesslex Institute Dba	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Bret C Votano	Case number (if known)	
------------------------	------------------------	--

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Total Claim 0.00
Total claims from Part 2	6g. 6h. 6i.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Add all other nonpriority unsecured claims.	6g. 6h. 6i.	\$ \$ 	0.00 0.00 198,449.00
	6j.	here. Total Nonpriority. Add lines 6f through 6i.	6j.	\$	198,449.00

Fill in this information to identify your case:								
Bret C Votano								
First Name	Middle Name	Last Name						
First Name	Middle Name	Last Name						
kruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK						
			☐ Check if this is an amended filing					
	Bret C Votano First Name First Name	Bret C Votano First Name Middle Name First Name Middle Name	Bret C Votano First Name Middle Name Last Name First Name Middle Name Last Name					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Numbe	whom you have the r, Street, City, State and ZIP	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	Oity		Olalo	211 0000	
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	Oity		Olaic	Zii Oodc	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	City		State	ZIF Code	
0	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	_

Official Form 106G

Fill in this	information to identify your	case:		
Debtor 1	Bret C Votano			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing	g) First Name	Middle Name	Last Name	
United Stat	es Bankruptcy Court for the:	EASTERN DISTRICT O	OF NEW YORK	
Case numb	per			☐ Check if this is an amended filing
	Form 106H ule H: Your Cod	ebtors		12/15
people are fill it out, are your name	filing together, both are equ	ally responsible for sup boxes on the left. Attacl . Answer every question	olying correct informat n the Additional Page to 	s complete and accurate as possible. If two married ion. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write
_ `	ou have any codebiors: (ii	you are ming a joint case,	do not list ettrer spouse	as a couebior.
■ No □ Yes				
Arizona No.	nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. . Did your spouse, former spor	Nevada, New Mexico, Pu	ierto Rico, Texas, Washi	y? (Community property states and territories include ington, and Wisconsin.)
3. In Colu in line Form 1 out Co	umn 1, list all of your codebt 2 again as a codebtor only i	ors. Do not include your f that person is a guarar	spouse as a codebtor	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 16G). Use Schedule D, Schedule E/F, or Schedule G to fi
	lame, Number, Street, City, State and Z	P Code		Check all schedules that apply:
_	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
	Number Street Dity	State	ZIP Code	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	_

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								•				
Fill	in this information	to identify your ca	ase:									
Del	btor 1	Bret C Votar	10				_					
	btor 2 buse, if filing)											
Uni	ited States Bankrup	otcy Court for the	EASTERN DISTRICT	OF NEW	/ YORK		_					
(If kr	se number	4001						□ A		d filing ent showi	ng postpetitior following date:	
	fficial Form							N	IM / DD/ Y	YYY		
S	chedule I:	Your Inco	ome									12/15
spo atta	use. If you are sep ch a separate she	parated and you	are married and not filir r spouse is not filing wi On the top of any addition	th you, c	lo not inclu	de infor	mati	on about	your spo	use. If m	nore space is	needed,
1.	Fill in your emplinformation.	loyment		Debto	r 1				Debtor 2	or non-	filing spouse	
	If you have more	, ,	Employment status	■ Em	ployed				■ Emplo	oyed		
	attach a separate page with information about additional		Employment status	☐ Not employed					☐ Not employed			
	employers.		Occupation	Operations MGR					Marketing Consulting			
	Include part-time self-employed wo		Employer's name	NTS (Contractor	s Corp		Self employed				
	Occupation may or homemaker, if		Employer's address		Bergen Stı dyn, NY 11							
			How long employed th	nere?	6 mos				6	yrs		
Pai	rt 2: Give De	etails About Mor	thly Income									
spoi	use unless you are	separated.	ate you file this form. If y		· ·		•	·		·	·	J
	ou or your non-filing e space, attach a s		ore than one employer, co this form.	mbine th	e informatio	n for all e	emplo	oyers for	that perso	n on the	lines below. If	you need
								For Dek	otor 1		ebtor 2 or ling spouse	
2.			ry, and commissions (be calculate what the monthly			2.	\$	8	,081.67	\$	2,971.00	
3.	Estimate and lis	t monthly overti	me pay.			3.	+\$		0.00	+\$_	0.00	- !

Official Form 106I Schedule I: Your Income page 1

8,081.67

2,971.00

4. Calculate gross Income. Add line 2 + line 3.

Deb	otor 1	Bret C Votano	-	(Case i	number (if known)				
					For	Debtor 1		or Debtor on-filing s		
	Cop	by line 4 here	4.		\$	8,081.67	\$		971.00	
5.	List	all payroll deductions:								
0.	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a 5b		\$_ \$	2,392.00 0.00	\$ \$		0.00	
	5c.	Voluntary contributions for retirement plans	50		\$ -	0.00			0.00	-
	5d.	Required repayments of retirement fund loans	50		\$ _	0.00	\$		0.00	=
	5e.	Insurance	5e		\$ —	0.00	_ ` .		0.00	
	5f.	Domestic support obligations	5f.		\$ -	0.00	- \$		0.00	
	5g.	Union dues	5g		\$ -	0.00	- \$		0.00	=
	5h.	Other deductions. Specify:		ر. ۱.+	<u>\$</u> —	0.00	- :		0.00	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$ \$		- · · . \$		0.00	-
		-			· —	2,392.00	- '			
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	5,689.67	. \$,971.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0.00	\$		0.00	
	8b.	Interest and dividends	8b		\$ —	0.00	- \$		0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$ \$	0.00	-		0.00	-
	8d.	Unemployment compensation	80		<u>\$</u> —	0.00	- ' '		0.00	
	8e.	Social Security	86		\$_	0.00	- \$		0.00	-
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g		\$ \$	0.00	\$ \$		0.00	-
	8h.	Other monthly income. Specify:	_	ه. ۱.+	\$ -	0.00			0.00	-
	OII.		_ '	···	Ψ_	0.00	· Ψ		0.00	¬
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	0.00	\$		0.00	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		5,689.67 + \$	2	2,971.00	= \$	8,660.67
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						<u> </u>		<u> </u>
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe				-	n Schedule	∍ J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies							\$	8,660.67
	_		_							y income
13.	Do :	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?							

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify your case:								
Deb	otor 1 Bret C Votano	Ch	eck if this	s is:					
Dah	otor 2		☐ An amended filing☐ A supplement showing postpetition chapte						
	ouse, if filing)		Ц			the following date:	ipiei		
Unit	ted States Bankruptcy Court for the: _EASTERN DISTRICT OF NEW Y	ORK		MM / E	DD / YYYY				
Cas	se number								
(If k	nown)								
Of	fficial Form 106J								
S	chedule J: Your Expenses						12/15		
Be info	as complete and accurate as possible. If two married people an ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.								
Par 1.	t 1: Describe Your Household Is this a joint case?								
١.	No. Go to line 2.								
	☐ Yes. Does Debtor 2 live in a separate household?								
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	s for Senarate Househi	old of De	ehtor 2					
2.	Do you have dependents?	s for deparate floasers	old of Di	DOIOI Z.					
۷.	Do not list Dobtor 1 and Fill out this information for	Dependent's relation	nshin to	Dei	oendent's	Does dependent			
	Debtor 2. Yes.	Debtor 1 or Debtor 2		age		live with you?			
	Do not state the	_				□ No			
	dependents names.	Son		14		Yes			
		Son		17		□ No ■ Yes			
						■ res			
						☐ Yes			
						□ No			
						☐ Yes			
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes								
Par	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless y	you are using this for	m 26 2	sunnlam	ont in a Cha	entor 12 caso to ron	ort		
exp	penses as of a date after the bankruptcy is filed. If this is a suppolicable date.								
	lude expenses paid for with non-cash government assistance is value of such assistance and have included it on Schedule I:								
	ficial Form 106I.)				Your expe	enses			
4.	The rental or home ownership expenses for your residence. I payments and any rent for the ground or lot.	Include first mortgage	4.	\$		0.00			
	If not included in line 4:								
	4a. Real estate taxes		4a.	\$		0.00			
	4b. Property, homeowner's, or renter's insurance		4b.	· —		0.00			
	4c. Home maintenance, repair, and upkeep expenses		4c.	· · —		0.00			
_	4d. Homeowner's association or condominium dues		4d.			0.00			
5.	Additional mortgage payments for your residence, such as ho	ome equity loans	5.	\$		0.00			

Pebtor 1 Bret C Vo	otano	Case num	ber (if known)	
. Utilities:				
	heat, natural gas	6a.	\$	1,110.00
•	ver, garbage collection	6b.		0.00
	, cell phone, Internet, satellite, and cable services	6c.		650.00
6d. Other. Spe		6d.	·	0.00
•	ekeeping supplies	7.	·	1,200.00
	hildren's education costs	8.	\$	300.00
	y, and dry cleaning	9.	\$	500.00
	roducts and services	10.	\$	400.00
. Medical and der		11.	·	
	•	11.	Φ	200.00
•	Include gas, maintenance, bus or train fare.	12.	\$	720.00
Do not include ca	ா payments. clubs, recreation, newspapers, magazines, and books		· -	350.00
	ibutions and religious donations	14.		0.00
	ibutions and religious donations	14.	Φ	0.00
5. Insurance.	surance deducted from your pay or included in lines 4 or 2	20		
15a. Life insura		20. 15a.	\$	115.00
15b. Health insu		15a. 15b.	· ·	1,800.00
15c. Vehicle ins		150. 15c.	·	
			· ·	300.00
15d. Other insur		15d.	\$	0.00
	clude taxes deducted from your pay or included in lines 4		Φ.	750.00
	iling spouse self employment income tax	16.	\$	750.00
7. Installment or le		47-	ф	400.00
17a. Car payme		17a.	· ·	480.00
17b. Car payme		17b.	·	0.00
17c. Other. Spe		17c.		0.00
17d. Other. Spe	·	17d.	\$	0.00
	of alimony, maintenance, and support that you did no		Φ.	0.00
	our pay on line 5, Schedule I, Your Income (Official F		· ·	
	you make to support others who do not live with you		\$	0.00
Specify:		19.		
	erty expenses not included in lines 4 or 5 of this form			
	on other property	20a.		0.00
20b. Real estate		20b.		0.00
20c. Property, h	omeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenan	ce, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowne	er's association or condominium dues	20e.	\$	0.00
. Other: Specify:		21.	+\$	0.00
, ,				
2. Calculate your n				
22a. Add lines 4	•		\$	8,875.00
22b. Copy line 22	? (monthly expenses for Debtor 2), if any, from Official For	m 106J-2	\$	
22c. Add line 22a	and 22b. The result is your monthly expenses.		\$	8,875.00
				<u> </u>
	nonthly net income.			
	2 (your combined monthly income) from Schedule I.	23a.		8,660.67
23b. Copy your	monthly expenses from line 22c above.	23b.	-\$	8,875.00
	our monthly expenses from your monthly income.	22	•	24.4.22
The result	is your monthly net income.	23c.	\$	-214.33
	n increase or decrease in your expenses within the y			
	u expect to finish paying for your car loan within the year or do yo	u expect your mortgage	payment to increas	se or decrease because of
_	erms of your mortgage?			
■ No.				
☐ Yes.	Explain here:			

Fill in this infor	rmation to identify your	case:			
Debtor 1	Bret C Votano				
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case number					
(if known)				☐ Check if this is an amended filing	
Official For		ın Individual	Debtor's Sched	lules 12/15	5
f two married p	eople are filing together	r, both are equally respor	nsible for supplying correct info	ormation.	
obtaining mone		n connection with a bank		g a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20	
Sig	gn Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bankrup	tcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)	
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed with t	his declaration and	
X /s/ Bre	et C Votano		X		
Bret C	C Votano ure of Debtor 1		Signature of Debtor	2	_
Date	February 25, 2022		Date		
-					_

Fill ir	n this infor	mation to identify you	case:				
Debte	or 1	Bret C Votano					
		First Name	Middle Name		Last Name		
Debte (Spous	or 2 se if, filing)	First Name	Middle Name		Last Name		
Unite	d States B	ankruptcy Court for the:	EASTERN DISTRICT	OF NEW	YORK		
Casa	number						
(if know							heck if this is an mended filing
Offi	cial Fo	orm 107					
			Affairs for Indiv	/idual	s Filing for B	ankruptcy	4/19
inforn numb	nation. If i er (if know	nore space is needed, n). Answer every ques	attach a separate sheet stion.	to this fo	orm. On the top of any	equally responsible for suppradditional pages, write you	
Part			rital Status and Where	rou Lived	Before		
1. V	What is you	ır current marital statu	s?				
I [■ Marrie						
2. [Ouring the	last 3 years, have you	lived anywhere other th	an where	you live now?		
I	■ No □ Yes. Li	st all of the places you li	ved in the last 3 years. Do	o not inclu	ıde where you live now		
	Debtor 1 P	rior Address:	Dates Debto	r 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2
						ity property state or territory co, Texas, Washington and W	
I [■ No □ Yes. M	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors	(Official F	Form 106H).		
Part	2 Expla	in the Sources of You	r Income				
·	СХРІС		- moonic				
F	ill in the to	al amount of income yo	nployment or from opera u received from all jobs ar have income that you rec	nd all busi	nesses, including part-		ndar years?
	□ No						
	Yes. F	II in the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(be	oss income fore deductions and clusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until ed for bankruptcy:	■ Wages, commissions bonuses, tips	,	\$11,192.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business	i		☐ Operating a business	

Official Form 107

De	btor 1 B	ret C Votar	10		Cas	e number (if known)		
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2021)		31, 2021)	■ Wages, commissions, bonuses, tips \$109,803.20		☐ Wages, comr bonuses, tips	nissions,		
				☐ Operating a business		☐ Operating a b	usiness	
		ndar year be o December	31 2020 \	■ Wages, commissions, bonuses, tips	\$45,503.00	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	usiness	
	winnings List each	. If you are fil	ing a joint case	ensions; rental income; intererand you have income that you from each source separate	ou received together, list it o	only once under Del	btor 1.	a gambing and lottery
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco	me	Gross income (before deductions and exclusions)
Pai	rt 3: Li:	st Certain Pa	yments You N	Made Before You Filed for I	Bankruptcy			
6.	Are eith	Neither De individual	ebtor 1 nor De primarily for a p 90 days before Go to line 7. List below ea	debts primarily consumer ebtor 2 has primarily consu- personal, family, or househol e you filed for bankruptcy, die ach creditor to whom you paid	Imer debts. Consumer debted purpose." d you pay any creditor a total d a total of \$6,825* or more in	I of \$6,825* or more	e? ments and th	ne total amount you
		* Subject	not include p	ditor. Do not include paymen ayments to an attorney for th on 4/01/22 and every 3 years	nis bankruptcy case.	•	• •	•
	■ Yes			both have primarily consule you filed for bankruptcy, die		I of \$600 or more?		
		■ No.	Go to line 7.					
		□ Yes	include paym	ach creditor to whom you pain nents for domestic support of his bankruptcy case.				
	Credito	r's Name and	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this p	payment for

Case number (if known)

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporation of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.											
	■ No□ Yes. List all payments to an insider.											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment							
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.											
	■ No □ Yes. List all payments to an insider											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment							
Pai	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures	para		molade distance of name							
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.											
	Yes. Fill in the details.											
	Case title Case number	Nature of the case	Court or agency		Status of the case							
	Step Equities LIc vs BRET VOTANO, BRET VOTANO ,BRET C VOTANO, et al. 201900117541	JUDGEMENT LIEN	NASSAU COUN	ITY CLERK	□ Pending□ On appeal□ Concluded							
	Capital One Bank Usa Na vs BRET VOTANO JT17003572	JUDGEMENT LIEN	NASSAU COUN	ITY CLERK	☐ Pending ☐ On appeal ☐ Concluded							
					- 1,624.00							
	Citibank Na vs BRET VOTANO JT16009516	JUDGEMENT LIEN	NASSAU COUN	ITY CLERK	☐ Pending ☐ On appeal ☐ Concluded - 2,349.00							
	Mary Napoli vs BRETT VOTANO, KONIG CAPITAL LLC 6166692018	CIVIL JUDGMENT	NASSAU SUPR - MINEOLA	EME COURT	☐ Pending ☐ On appeal ☐ Concluded - 60,000.00							
	US Bank Trust NA et al v. Meredith Votano A/K/A Meredith S. Votano, Bret Votano et al. 614996/18	foreclosure	Supreme Court County of NAss		■ Pending □ On appeal □ Concluded							

Debtor 1 Bret C Votano

Case 8-22-70337-las Doc 1 Filed 02/25/22 Entered 02/25/22 17:15:57 **Bret C Votano** Case number (if known) 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

Part 7: List Certain Payments or Transfers

consulted about seeking bankruptcy or preparing a bankruptcy petition?

☐ No

Debtor 1

No ☐ Yes

Address:

No

No

Yes. Fill in the details.

Person Who Was Paid Address **Email or website address** Person Who Made the Payment, if Not You Description and value of any property transferred

Date payment or transfer was made

Amount of payment

Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

Debtor 1 Bret C Votano Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred		perty	Date payment or transfer was made	Amount of payment				
	Law Offices of Robert M. Fox 630 Third Avenue, 18th FI New York, NY 10017 robert@rfoxlaw.com	Attorney Fees			02/16/22	\$3,000.00				
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.									
	Yes. Fill in the details.									
	Person Who Was Paid Address	Description and value of any property transferred		Date payment or transfer was made	Amount of payment					
10	Within 2 years before you filed for honkrunter	did you call trade		ofor only proper	norty to onyone other	r than property				
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?									
	Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No									
	Yes. Fill in the details.									
	Person Who Received Transfer Address	Description and property transfer			any property or s received or debts schange	Date transfer was made				
	Person's relationship to you									
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No									
	☐ Yes. Fill in the details.									
	Name of trust	e of trust Description and value of the property transferred				Date Transfer was made				
Par	List of Certain Financial Accounts, Instr	uments, Safe Deposi	t Boxes, and Sto	rage Units						
20.	Within 1 year before you filed for bankruptcy,	were any financial ad	counts or instru	ments held in	n your name, or for y	our benefit, closed,				
	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.									
	■ No □ Yes. Fill in the details.									
		ast 4 digits of	Type of accou	nt or Da	ite account was	Last balance				
		ccount number	instrument	clo mo	osed, sold, oved, or insferred	before closing or transfer				
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?									
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?				
		•								

22.	2. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the cont	ents	Do you still have it?			
Par	9: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any prope	rty you borrowed fr	om, are storing for	, or hold in trust			
	■ No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the prop	erty	Value			
Par	10: Give Details About Environmental Informa	,						
For	he purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the airegulations controlling the cleanup of these sub	ir, land, soil, surface water, groun						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	defined under any environmental	law, whether you n	ow own, operate, o	or utilize it or used			
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.							
Rep	ort all notices, releases, and proceedings that yo		n thev occurred.					
·	Has any governmental unit notified you that you		•	on of an environme	intal law?			
	_	. may be made of peromiany made	o unuon on mi violum	,,, o, a,, o,,,,, o,,,,,				
	■ No □ Yes. Fill in the details.							
		0	F		Data of waller			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmenta know it	law, if you	Date of notice			
25.	Have you notified any governmental unit of any	release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmenta know it	l law, if you	Date of notice			
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	ironmental law? Inc	:lude settlements a	nd orders.			
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case)	Status of the case			
Par	11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have a	ny of the following o	connections to any	business?			
	☐ A sole proprietor or self-employed in a t	•		-				
	A member of a limited liability company	(LLC) or limited liability partnersh	nip (LLP)					
Offici	al Form 107 Statement of	of Financial Affairs for Individuals Filin	g for Bankruptcy		page			

Deb	or 1 Bret C Votano		ase number (i	f known)
	☐ A partner in a partnership			
	☐ An officer, director, or managing e	xecutive of a corporation		
	☐ An owner of at least 5% of the voti	ng or equity securities of a corporation		
	☐ No. None of the above applies. Go to	Part 12.		
	Yes. Check all that apply above and fi	II in the details below for each business.		
	Business Name Address	Describe the nature of the business		Identification number clude Social Security number or ITIN.
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		·
	Konig Capital LLC	real estate investments	Dates bus	siness existed 81-1091589
	11 Sunrise Plaza Suite 304	real estate investments	From-To	
	Valley Stream, NY 11580		110111-10	8/26/15- present (inactive)
	Dagga Int'l LLC	real estate investment	EIN:	
			From-To	5/20/19-7/9/20
	■ No □ Yes. Fill in the details below. Name Address	Date Issued		
	(Number, Street, City, State and ZIP Code)			
Part	12: Sign Below			
are to with 18 U.	ue and correct. I understand that making as bankruptcy case can result in fines up to S.C. §§ 152, 1341, 1519, and 3571. Bret C Votano	inancial Affairs and any attachments, and I a false statement, concealing property, or a \$250,000, or imprisonment for up to 20 years.	obtaining mo	ney or property by fraud in connection
	t C Votano ature of Debtor 1	Signature of Debtor 2		
Date	February 25, 2022	Date		
Did y ■ No □ Ye		nent of Financial Affairs for Individuals Fili	ng for Bankru	uptcy (Official Form 107)?
■ N		ot an attorney to help you fill out bankruptoruptcy Petition Preparer's Notice, Declaration,		e (Official Form 119).

Fill in this infor	mation to identify your	case:							
Debtor 1	Bret C Votano								
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK						
Case number (if known)									
Official Fo									
Stateme	nt of Intentio	n for Individu	ıals Filing Under	Chapter 7 12/15					
creditors have you have least You must file the	re claims secured by yo sed personal property a is form with the court w	nd the lease has not exp ithin 30 days after you f	oired. ile your bankruptcy petition or	by the date set for the meeting of creditors, d copies to the creditors and lessors you list					
on the	•	o oour extends the time	, ioi dadde. Fod madt aldo dem	a copies to the orealters and lessors you list					

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

De	btor 1	Bret C Votano	Case number (if known)	
name: Description of property securing debt:		у	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□Yes
For in tl	any un	rmation below. Do not list real esta	perty Leases lat you listed in Schedule G: Executory Contracts and Unexpired late leases. Unexpired leases are leases that are still in effect; the lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2)	lease period has not yet ended.
De	scribe	your unexpired personal property l	leases	Will the lease be assumed?
De	ssor's n scriptio operty:	name: n of leased		□ No □ Yes
De	ssor's n scriptio operty:	name: n of leased		□ No
De	ssor's n scriptio operty:	name: in of leased		□ No □ Yes
De	ssor's n scriptio operty:	name: n of leased		□ No □ Yes
De	ssor's n scriptio operty:	name: on of leased		□ No □ Yes
De	ssor's n scriptio operty:	name: n of leased		□ No □ Yes
De	ssor's n scriptio operty:	name: n of leased		□ No
Pa	rt 3:	Sign Below	indicated my intention about any property of my estate that sec	
		hat is subject to an unexpired lease		
X	Bret	Bret C Votano t C Votano ature of Debtor 1	XSignature of Debtor 2	
	Date	February 25, 2022	Date	

Official Form 108

Fill i	n this information to	identify your	case:							irected	in this form and	in Form
Deb	tor 1 Bret (C Votano					122	2A-1Su	ipp:			
	tor 2						ı	□ 1. T	here is no pres	umptior	of abuse	
	ed States Bankrupt e number	cy Court for the	ne: Eastern [District o	f New Y	′ork	ı	a		nade ur	mine if a presum ider <i>Chapter 7 N</i> rm 122A-2).	•
(if kno							I				ot apply now bed	
							ļ		eck if this is a			,
Off	ficial Form	122A - 1									3	
Ch	apter 7 Sta	atemen	t of You	r Cu	rren	t Monthly	Inc	ome	е			04/20
attacl case	s complete and accur h a separate sheet to number (if known). I fying military service (11: Calculate	this form. Inc f you believe the e, complete and	lude the line nu hat you are exer	mber to mpted fro of Exem	which thom a pre	ne additional inform sumption of abuse	nation a	ipplies. se you	On the top of a do not have prin	ny addit narily co	ional pages, write onsumer debts or	your name and because of
1.	What is your mar	ital and filing	status? Che	ck one o	nly.							
	☐ Not married. F	ill out Columr	n A, lines 2-11.									
	☐ Married and ye	our spouse is	s filing with yo	ou. Fill c	out both	Columns A and B	, lines	2-11.				
	■ Married and ye	our spouse i	s NOT filing w	ith you	. You a	nd your spouse a	are:					
	Living in the	e same hous	ehold and are	not leg	ally sep	parated. Fill out bo	oth Col	lumns .	A and B, lines 2	2-11.		
	penalty of p	erjury that you	u and your spo	use are	legally	lumn A, lines 2-11; separated under n Means Test require	onban	kruptcy	y law that applic	es or the		
10 th	ill in the average mod 01(10A). For example, se 6 months, add the in bouses own the same	, if you are filing ncome for all 6 i	on September 1 months and divid	5, the 6-1 le the tota	month pe al by 6. F	eriod would be March ill in the result. Do no	n 1 throu ot includ	igh Aug de any ir	just 31. If the amo	ount of your	our monthly income once. For example	e varied during e, if both
								Colun			nn B or 2 or filing spouse	
2.	Your gross wage payroll deductions		s, bonuses, o	vertime	, and co	ommissions (befo	ore all	\$	8,191.00	\$	0.00	
3.	Alimony and mai		yments. Do no	ot include	e payme	ents from a spouse	e if	\$	0.00	\$	0.00	
4.	All amounts from of you or your de from an unmarried and roommates. In filled in. Do not incommand the second seco	n any source pendents, in d partner, men nclude regular	cluding child nbers of your h	suppor lousehol from a s	t. Includ ld, your	le regular contribu dependents, pare	itions nts,	\$	0.00	\$	0.00	
5.	Net income from	operating a		fession ebtor 1	, or farr	n Debtor 2						
	Gross receipts (be deductions)		\$	0.00	\$	4,083.00						
	Ordinary and nece operating expense	•	-\$	0.00	-\$	1,070.00						
	Net monthly incombusiness, professi		\$	0.00	\$	2 04.5 00	opy ere ->	\$	0.00	\$	3,013.00	
6.	Net income from	rental and of	ther real prop	erty		Dahtend						
	Cross ressints /h-	fore all ded	ationa)		\$	Debtor 1 0.00						
	Gross receipts (be Ordinary and nece		*		-\$	0.00						
	Net monthly incom		•	roperty	\$	0.00 Copy h	ere ->	\$	0.00	\$	0.00	
7	Interest dividend		·	-17	-			\$	0.00	\$	0.00	

Official Form 122A-1

				Column A		Column B	
				Debtor 1		Debtor 2 o	-
8.	Unemployment compensation			\$	0.00	\$	0.00
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	t received was a benefi	t under				
	For you\$	0.0	00_				
	For your spouse \$						
	Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as sonot include any compensation, pension, pay, annuity, outlined States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that places not exceed the amount of retired pay to which your fretired under any provision of title 10 other than chapter	tated in the next senter r allowance paid by the ty, combat-related injur es. If you received any pay only to the extent the u would otherwise be en	nce, do e y or retired nat it	\$	0.00	\$	0.00
10.	Income from all other sources not listed above. Sp. Do not include any benefits received under the Social St. under the Federal law relating to the national emergency under the National Emergencies Act (50 U.S.C. 1601 ecoronavirus disease 2019 (COVID-19); payments receiverime, a crime against humanity, or international or donocompensation pension, pay, annuity, or allowance paid Government in connection with a disability, combat-related of a member of the uniformed services. If necess separate page and put the total below	Security Act; payments by declared by the Preset seq.) with respect to to the ved as a victim of a wanestic terrorism; or distance by the United States ated injury or disability,	made ident he r				
	·			\$	0.00	\$	0.00
				\$	0.00	\$	0.00
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	8,191.00	+ \$ _	3,013.00	Total current monthly income
Part	Determine Whether the Means Test Applies to Calculate your current monthly income for the year.						
12.	12a. Copy your total current monthly income from line 1	·		Con	y line 11	here->	\$ 11.204.00
	rza. Copy your total current monthly income non-line	l1		COP	y iiiie i i	ilere=>	\$ 11,204.00
	Multiply by 12 (the number of months in a year)						x 12
	12b. The result is your annual income for this part of the	e form				12b	\$ 134,448.00
13.	Calculate the median family income that applies to	you. Follow these step	s:				
	Fill in the state in which you live.	NY					
	Fill in the number of people in your household.	4					
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link sp	ecified	in the separ	ate instru	13. ctions	\$112,424.00
14.	How do the lines compare?						
	14a.		eck box	1, There is	no presur	mption of abus	se.
	Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.	of page 1, check box 2,	The pr	esumption o	f abuse is	determined b	y Form 122A-2.
Part							
	By signing here, I declare under penalty of perjury	that the information or	this sta	atement and	in any att	tachments is t	rue and correct.
	X /s/ Bret C Votano						
	Bret C Votano						

Bret C Votano

Case 8-22-70337-las Doc 1 Filed 02/25/22 Entered 02/25/22 17:15:57

Debtor 1	Bret C Votano	Case number (if known)	
	Signature of Debtor 1		
Da	February 25, 2022 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	1.	

Fill	in this info	ormation to identify your case:	Check the appropriate box as directed in					
Deb	tor 1	Bret C Votano		lines 40	or 42:			
Deb	otor 2			Accord Statem	ling to the calculations	ations require	d by this	
	ouse, if filing	g)						
Unit	ed States E	Bankruptcy Court for the: Eastern District of New York		■ 1. T	here is no presu	mption of ab	use.	
Cas	e number			□ 2. T	here is a presun	nption of abu	se.	
(if kı	nown)			<u> </u>				
Off	ficial E	orm 100A 0		☐ Check	if this is an an	nended filin	g	
		orm 122A - 2 7 Magns Tost Calculation					0.444.0	
CII	apter	7 Means Test Calculation					04/19	
To fi	II out this f	form, you will need your completed copy of Chapter 7 Stateme	nt of Your Curren	t Monthly	Income (Officia	Form 122A	-1).	
spac	e is neede tional page	e and accurate as possible. If two married people are filing tog d, attach a separate sheet to this form, Include the line numbe es, write your name and case number (if known). termine Your Adjusted Income						
1.	Copy you	r total current monthly income. Copy line 11 fr	om Official Form	122A-1 he	re=>\$	11	,204.00	
2.	Did you fi	ill out Column B in Part 1 of Form 122A-1?						
	□ No. F	ill in \$0 for the total on line 3.						
	Yes. Is	s your spouse Filing with you?						
	■ No.	Go to line 3.						
	☐ Yes.	Fill in \$0 for the total on line 3.						
3.		our current monthly income by subtracting any part of your spendents. Follow these steps:	ouse's income not	used to p	ay for the			
		, Column B of Form 122A–1, was any amount of the income you re of you or your dependents?	eported for your spo	ouse NOT	regularly used fo	r the househ	old	
	■ No. F	ill in 0 for the total on line 3.						
	☐ Yes. F	ill in the information below:						
	For	te each purpose for which the income was used example, the income is used to pay your spouse's tax debt or to port other than you or your dependents.	Fill in the amare subtraction	ng from				
			\$					
			•					
			\$					
			\$					
		Total.	\$0	.00				
				Conv	total here=>	- \$	0.00	
						Ψ		
4.	Adjust yo	our current monthly income. Subtract line 3 from line 1.				\$11,20	04.00	

Official Form 122A-2

ırt 2	Calculate Your Deductions from Your Income							
to a		Local Standards for certain expense amounts. Use these amounts and ards, go online using the link specified in the separate available at the bankruptcy clerk's office.						
you	r actual expenses if they are higher than the standards. [s of your actual expense. In later parts of the form, you will use some of Do not deduct any amounts that you subtracted fro your spouse's hat you subtracted from in income in lines 5 and 6 of form 122A-1.						
If yo	our expenses differ from month to month, enter the avera	ge expense.						
Wh	enever this part of the from refers to you, it means both y	ou and your spouse if Column B of Form 122A-1 is filled in.						
5.	The number of people used in determining your dec	ductions from income						
	Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.							
Nat	ional Standards You must use the IRS National	al Standards to answer the questions in lines 6-7.						
 7. 	Standards, fill in the dollar amount for food, clothing, and other items. \$							
Pec	ople who are under 65 years of age							
	7a. Out-of-pocket health care allowance per person	\$68.00						
	7b. Number of people who are under 65	X4						
	7c. Subtotal. Multiply line 7a by line 7b.	\$\$ Copy here=> \$272.00						
Pec	ople who are 65 years of age or older							
	7d. Out-of-pocket health care allowance per person	\$142.00						
	7e. Number of people who are 65 or older	xo_						
	7f. Subtotal. Multiply line 7d by line 7e.	\$ 0.00 Copy here=> +\$ 0.00						

Bret C Votano

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Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Case number (if known)

		n information from ccy purposes into t	the IRS, the U.S. T two parts:	rustee Program	has divided th	e IRS L	₋ocal Standa	ard for hou	sing for		
= F	lousi	ng and utilities - In	nsurance and opera	ating expenses							
-	lousi	ng and utilities - M	lortgage or rent exp	oenses							
To a	ınsw	er the questions in	lines 8-9, use the	U.S. Trustee Pro	gram chart.						
			sing the link specifie able at the bankrupto		instructions for	this for	m.				
8.	Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses.									834.00	
9.	Hou	sing and utilities -	Mortgage or rent e	xpenses:							
	9a.		of people you enterently for mortgage or re					\$	3,299.00		
	9b.	Total average mon	thly payment for all i	mortgages and ot	her debts secui	red by y	our home.				
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.										
		Name of the creditor	or		Average mont payment	hly					
		-NONE-			\$						
			Total average mon	thly payment	\$	0.00	Copy here=>	-\$	0.00	Repeat this amount on line 33a.	
	9c.	Net mortgage or re	ent expense.								
			otal average monthly f this amount is less				\$	3,299.0	Copy here=>	\$	3,299.00
10.			S. Trustee Program					g is incorre	ect and	\$	0.00
	Ex	olain why:									
11.	Loc	al transportation e	xpenses: Check the	number of vehic	les for which yo	u claim	an ownershi	p or operat	ting expense.		
		. Go to line 14.									
	■ 1	. Go to line 12.									
		or more. Go to line	12.								
12.			ense: Using the IRS in the Operating Cos							\$	355.00

Bret C Votano

13.	You	icle ownership or lease expense: Using the IRS Local S may not claim the expense if you do not make any loan o e than two vehicles.				
Vel	hicle	1 Describe Vehicle 1:				
13a.	Own	ership or leasing costs using IRS Local Standard		\$ 533.00		
13b.		rage monthly payment for all debts secured by Vehicle 1. not include costs for leased vehicles.				
	are o	alculate the average monthly payment here and on line 1 contractually due to each secured creditor in the 60 month truptcy. Then divide by 60.		i.		
		Name of each creditor for Vehicle 1	Average monthly payment			
		-NONE-	\$			
		Total Average Monthly Payment	\$	Copy here => -\$	0.00 Repeat this amount on line 33b.	
13c.		Vehicle 1 ownership or lease expense tract line 13b from line 13a. if this amount is less than \$0,	enter \$0.	\$533.00	Copy net Vehicle 1 expense here => \$	533.00
Vel	hicle	2 Describe Vehicle 2:				
13d.	Own	ership or leasing costs using IRS Local Standard		\$ 0.00		
13e.		rage monthly payment for all debts secured by Vehicle 2. ed vehicles.	Do not include costs for			
		Name of each creditor for Vehicle 2	Average monthly payment			
			\$			
		Total Average Monthly Payment	\$	Copy here => -\$0.	Repeat this amount on line 33c.	
13f.		Vehicle 2 ownership or lease expense tract line 13e from line 13d. if this amount is less than \$0,	enter \$0	\$	Copy net Vehicle 2 expense here => \$	0.00
14.		lic transportation expense: If you claimed 0 vehicles in apportation expense allowance regardless of whether you			Public \$	0.00
15.	also	itional public transportation expense: If you claimed 1 deduct a public transportation expense, you may fill in what aim more than the IRS Local Standard for <i>Public Transp</i>	nat you believe is the app			217.00

Bret C Votano

Bret C Votano Debtor 1 Case number (if known) Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 3,147.00 Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 0.00 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than 0.00 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 0.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. **Education:** The total monthly amount that you pay for education that is either required: as a condition for your job, or 0.00 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.

Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment

expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.

Add lines 6 through 23.

24. Add all of the expenses allowed under the IRS expense allowances.

0.00

10.397.00

Case number (if known) Additional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. Health insurance 1.800.00 Disability insurance 0.00 Health savings account 0.00 1.800.00 1.800.00 Total Do you actually spend this total amount? No. How much do you actually spend? 26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may 0.00 include contributions to an account of a qualified ABLE program. 26 U.S.C.§ 529A(b). 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. 0.00 By law, the court must keep the nature of these expenses confidential. 28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional 0.00 amount claimed is reasonable and necessary. 29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$170.83* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. 300.00 * Subject to adjustment on 4/01/22, and every 3 years after that for cases begun on or after the date of adjustment. 30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. 0.00 You must show that the additional amount claimed is reasonable and necessary. 31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial 0.00 instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2). 2,100.00 32. Add all of the additional expense deductions. \$ Add lines 25 through 31.

Bret C Votano

Deductions for Debt Payment 33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Average monthly Mortgages on your home: payment 33a. 0.00 Copy line 9b here Loans on your first two vehicles: 33b. 0.00 Copy line 13b here 33c. Copy line 13e here 0.00 33d. List other secured debts: Name of each creditor for other secured debt Identify property that secures the debt Does payment include taxes or insurance? No -NONE-Yes No П Yes No ☐ Yes Copy total 0.00 0.00 33e. Total average monthly payment. Add lines 33a through 33d here=> 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt **Total cure** Monthly cure amount amount -NONE-\$ $\div 60 =$ \$ Сору total 0.00 0.00 \$ Total here=> 35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. ☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims $0.00 \div 60 = \$$ 0.00

Bret C Votano

For more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for <i>Bankruptcy Basions</i> for this form. <i>Bankruptcy Basics</i> may also be available.	s <i>ics</i> specific				
■ No.	■ No. Go to line 37.					
☐ Yes.	☐ Yes. Fill in the following information.					
	Projected monthly plan payment if you were filing under Chapter 13					
	Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unit (for all other districts).	listricts in A	labama			
	To find a list of district multipliers that includes your district link specified in the separate instructions for this fobe available at the bankruptcy clerk's office.			Copy total		
	Average monthly administrative expense if you were fi	ling under (Chapter 13	\$ here=> \$		
	of the deductions for debt payment. es 33e through 36.			\$	0.00	
Total Deduc	ctions from Income					
38. Add all d	of the allowed deductions.					
	ne 24, All of the expenses allowed under IRS					
	e allowances	\$	10,397.00			
Copy lir	ne 32, All of the additional expense deductions	\$	2,100.00			
Copy lir	ne 37, All of the deductions for debt payment	+\$	0.00			
	Total deductions	\$	12,497.00	Copy total here=> \$1	2,497.00	
Part 3: De	termine Whether There is a Presumption of Abuse					
39. Calculat	te monthly disposable income for 60 months					
	opy line 4, adjusted current monthly income	\$	11,204.00			
	ppy line 38, <i>Total deductions</i>	· —	12,497.00			
390. 00	ppy line 30, rotal deductions	- \$	12,497.00	\neg		
	onthly disposable income. 11 U.S.C. § 707(b)(2). ubtract line 39b from line 39a	\$	-1,293.00	Copy here=>\$ -1,293.00		
For the	next 60 months (5 years)			x 60		
	,					
39d. To	otal. Multiply line 39c by 60	390	d. \$	7,580.00 Copy \$ -77,	580.00	
40. Find out	whether there is a presumption of abuse. Check the	box that a	pplies:			
■ The	line 39d is less than \$8,175*. On the top of page 1 of the	nis form, ch	eck box 1, The	e is no presumption of abuse. Go to Part	5.	
	line 39d is more than \$13,650*. On the top of page 1 o 4 if you claim special circumstances. Go to Part 5.	f this form,	check box 2, TI	ere is a presumption of abuse. You may	fill out	
☐ The line 39d is at least \$8,175*, but not more than \$13,650*. Go to line 41.						
	to adjustment on 4/01/22, and every 3 years after that for			e date of adjustment.		

Bret C Votano

Debtor 1	1 Bret C Votano Case number (if known)				
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled on A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.			
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)	(I) \$	Copy here=>	\$
10 B		Multiply line 41a by 0.25			
259	% of y	ne whether the income you have left over after subtracting all allowed de rour unsecured, nonpriority debt. e box that applies:	ductions is enough to pay	,	
		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>The</i> part 5.	ere is no presumption of abu	se.	
		39d is equal to or more than line 41b. On the top of page 1 of this form, che <i>umption of abuse.</i> You may fill out Part 4 if you claim special circumstances. The			
Part 4:	Giv	re Details About Special Circumstances			
		we any special circumstances that justify additional expenses or adjustmentative? 11 U.S.C. § $707(b)(2)(B)$.	ents of current monthly in	come fo	or which there is no
■ N	o. Go	o to Part 5.			
□ Y		l in the following information. All figures should reflect your average monthly exm. You may include expenses you listed in line 25.	kpense or income adjustmer	nt for ea	ach
	ne	ou must give a detailed explanation of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation justments.			
	G		Average monthly expense or income adjustment		
			\$		
			\$	_	
	_		\$		
	_		\$	_	
Part 5:	Sic	ın Below			
		gning here, I declare under penalty of perjury that the information on this state	ment and in any attachment	s is true	and correct.
,	X /s/	Bret C Votano			
•	Br	ret C Votano quature of Debtor 1			
Dat	te Fe	ebruary 25, 2022			
	M	M / DD / YYYY			

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

	Eas	tern District of New Yor	k			
In	re Bret C Votano	5.	Case No.			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR DE	EBTOR(S)		
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filibe rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to		
	For legal services, I have agreed to accept		\$	4,562.00		
	Prior to the filing of this statement I have received		\$	3,000.00		
	Balance Due		\$	1,562.00		
2.	\$338.00 of the filing fee has been paid.					
3.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
4.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
5.	■ I have not agreed to share the above-disclosed com	pensation with any other person	unless they are mem	bers and associates of my law firm.		
	☐ I have agreed to share the above-disclosed compensor copy of the agreement, together with a list of the national control of the same copy of the agreement, together with a list of the national copy of the agreement.					
6.	In return for the above-disclosed fee, I have agreed to r	render legal service for all aspec	ts of the bankruptcy c	rase, including:		
	a. Analysis of the debtor's financial situation, and rendb. Preparation and filing of any petition, schedules, stac. Representation of the debtor at the meeting of creditd. [Other provisions as needed]	tement of affairs and plan which	n may be required;			
7.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.	schargeability actions, jud	g service: icial lien avoidance	es, relief from stay actions or		
		CERTIFICATION				
this	I certify that the foregoing is a complete statement of an bankruptcy proceeding.	ny agreement or arrangement for	r payment to me for re	epresentation of the debtor(s) in		
	February 25, 2022	/s/ Robert M. Fox				
Date		•	Robert M. Fox, Esq. Signature of Attorney			
		Law Offices of R	obert M. Fox			
		630 Third Avenue				
New York, NY 10017 (212) 867-9595 Fax: (212) 949-1857			7			
		robert@rfoxlaw.c	com			
		Name of law firm				

United States Bankruptcy Court Eastern District of New York

In re	Bret C Votano		Case No.	
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: February 25, 2022

/s/ Bret C Votano
Bret C Votano
Signature of Debtor

Date: February 25, 2022

/s/ Robert M. Fox, Esq.
Signature of Attorney
Robert M. Fox, Esq.
Law Offices of Robert M. Fox

630 Third Avenue, 18th FI New York, NY 10017 (212) 867-9595 Fax: (212) 949-1857

USBC-44 Rev. 9/17/98

Bank of America Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634

Four Twelve Ventures LLC c/o Paul Q. Goyette ESQ 2366 Gold MEadow Way Suit Rancho Cordova, CA 95670

Joseph & Mary Napoli c/o Harry Raptakis, ESQ 88 Second Street Mineola, NY 11501

Juliana Thibaut Friedman Vartolo LLP 85 Broad Street, ste 501 New York, NY 10004

Mercedes-Benz Financial Services Attn: Bankruptcy Po Box 685 Roanoke, TX 76262

Sls/equity Attn: Bankruptcy 8742 Lucent Blvd. Highlands Ranch, CO 80129

Step Equities LLC c/o Joseph J. Schwartz, PC 3118 Quentin Rd. Brooklyn, NY 11234

TIAA Bank 501 Riverside Ave Jacksonville, FL 32202

Transworld System Inc Attn: Bankruptcy Po Box 15630 Wilmington, DE 19850 U.S. Department of the Treasury (Fax Onl Attn: Bankruptcy 1500 Pennsylvania Avenue, Nw Washington, DC 20220

US Small Business Administration Attn: Bankruptcy 409 3rd St, Sw Washington, DC 20416

Volkswagen Credit, Inc Attn: Bankruptcy Po Box 3 Hillsboro, OR 97123

Weltman Weingerg & Rei 965 Keynote Circle Brooklyn Heights, OH 44131

Weltman Weingerg & Rei 965 Keynote Circle Brooklyn Heights, OH 44131

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

CASE NO.:.

DEBTOR(S): Bret C Votano

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to	to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE SCHEDULE "A" OF RELATED CASE:	E "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
	s who have had prior cases dismissed within the preceding 180 days may not ired to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S AT	TTORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New Y	Tork (Y/N):Y
I certify under penalty of perjury that the within bankrupte as indicated elsewhere on this form. /s/ Robert M. Fox, Esq.	cy case is not related to any case now pending or pending at any time, except
Robert M. Fox, Esq. Signature of Debtor's Attorney Law Offices of Robert M. Fox 630 Third Avenue, 18th FI	Signature of Pro Se Debtor/Petitioner
New York, NY 10017 (212) 867-9595 Fax:(212) 949-1857	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009